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Upder the Paperwork Restriction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. CONTINUED PROSECUTION APPLICATION (CPA) REQUEST TRANSMITTAL Submit an original, and a duplicate for fee processing. (Only for Continuation or Divisional applications under 37 CFR 1.53 (d))						
Mail Stop CPA Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attomey Docket No. of Prior Application First Named Inventor Examiner Name Group Art Unit Express Mail Label No.	95013A1 Waleh, Ahmad (NMI) Alexander Markoff 1746 EV 349477068				
This is a request for a X continuation or divisional application under 37 CFR 1.53(d). (continued prosecution application (CPA)) of prior application number 09/141,443						
5. Information Disclosure Statement (IDS) is enclosed: a. PTO-1449 b. Copies of IDS Citations						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CPA, Washington, DC 20231.

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	**					
CLAIMS	(1) FOR	(2) NUMBER FILED (3)	NUMBER EXTRA	(4) RATE	(5) CALCULATIONS	
	TOTAL CLAIMS	28 - 20* =	8 >	(\$ <u>18</u> =	\$ 144.00	
*	INDEPENDENT CLAIMS	1 - 3** =	0 >	(\$ <u>84</u> =	\$ 0.00	
MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			R 1.16(d))	- \$ <u>280</u> =	\$0.00	
ng Son Maria Britania (Birandary - Sa				BASIC FEE (37 CFR 1.16)	\$750.00	
Total of above Calculations = \$894.0						
*	Reduction by 50% for filing		\$ 447.00			
*		Reissue claims in excess of 20 and over original patent Reissue independent claims over original patent. TOTAL				
 7. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. a. Fees required under 37 CFR 1.16. b. Fees required under 37 CFR 1.17. c. Fees required under 37 CFR 1.18. 8. X A check in the amount of \$447.00 is enclosed. 9. Payment by credit card. Form PTO-2038 is attached. 10. Applicant requests suspension of action under 37 CFR 1.103(b) for a period of months (not to exceed 3 months) and the fee under 37 CFR 1.17(i) is enclosed. 11. X New Attorney Docket Number, if desired						
NOTE:	The prior application's co UNLESS a new correspon	rrespondence address w	ill carry over to this Cl	PA		
		14. NEW CORRESP		ESS		
				7		
Customer Number or Bar Code Label			Attach bar code label here)	or New correspondence address below		
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	15. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Nome (Print/Type) Reguld W. Collins 4.4					

15. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Name (Print/Type)	Bavid W. Collins			
Signature	David W. Cllin			
Registration No. (Attorney/Agent)	26,857			
Date	July 14, 2003			

[Page 2 of 2]





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I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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